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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. A1585.0001	
		First Inventor Akio Ogawa	
		Title ORGANIC EL DISPLAY ELEMENT	
		Express Mail Label No. _____	

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages 13] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the invention - Brief Summary of the invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 1] 5. Oath or Declaration [Total Sheets _____] <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies
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ACCOMPANYING APPLICATIONS PARTS	
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small> 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Citations Statement (IDS)/PTO-1449 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input checked="" type="checkbox"/> Other: Claim for Priority and Submission of Documents	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation
 ☐ Divisional
 ☐ Continuation-in-part (CIP)
 of prior application No.: _____

Prior application information: Examiner _____ Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		32172		or <input checked="" type="checkbox"/> Correspondence address below	
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Name (Print/Type) Mark J. Thronson	Registration No. (Attorney/Agent) 33,082
Signature	Date July 14, 2003

18334 U.S. PTO
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FEE TRANSMITTAL for FY 2003		Complete if Known																																															
Effective 01/01/2003, Patent fees are subject to annual revision.		Application Number	Not Yet Assigned																																														
		Filing Date	Concurrently Herewith																																														
		First Named Inventor	Akio Ogawa																																														
		Examiner Name	Not Yet Assigned																																														
		Art Unit	N/A																																														
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METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																															
<div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None</div><div><input checked="" type="checkbox"/> Deposit Account</div></div> <div style="margin-top: 5px;">Deposit Account Number: 50-2215</div> <div style="margin-top: 5px;">Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP</div> <div style="margin-top: 5px;">The Director is hereby authorized to: (check all that apply)</div> <div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> Charge fee(s) indicated below</div><div><input checked="" type="checkbox"/> Credit any overpayments</div></div> <div style="margin-top: 5px;"><input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application</div> <div style="margin-top: 5px;"><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</div>		3. ADDITIONAL FEES																																															
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<table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"><thead><tr><th colspan="2">Large Entity</th><th colspan="2">Small Entity</th><th rowspan="2">Fee Description</th><th rowspan="2">Fee Paid</th></tr><tr><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th></tr></thead><tbody><tr><td>1001</td><td>750</td><td>2001</td><td>375</td><td>Utility filing fee</td><td>750.00</td></tr><tr><td>1002</td><td>330</td><td>2002</td><td>165</td><td>Design filing fee</td><td></td></tr><tr><td>1003</td><td>520</td><td>2003</td><td>260</td><td>Plant filing fee</td><td></td></tr><tr><td>1004</td><td>750</td><td>2004</td><td>375</td><td>Reissue filing fee</td><td></td></tr><tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="5" style="text-align: right; font-weight: bold;">SUBTOTAL (1)</td><td>(\$) 750.00</td></tr></tbody></table>		Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1001	750	2001	375	Utility filing fee	750.00	1002	330	2002	165	Design filing fee		1003	520	2003	260	Plant filing fee		1004	750	2004	375	Reissue filing fee		1005	160	2005	80	Provisional filing fee		SUBTOTAL (1)					(\$) 750.00		
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**or number previously paid, if greater; For Reissues, see above																																																	
SUBMITTED BY		Complete (if applicable)																																															
Name (Print/Type) Mark J. Thronson		Registration No. (Attorney/Agent) 33,082	Telephone (212) 835-1400																																														
Signature		Date	July 14, 2003																																														